FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

SEC Mail Processing Section

Washington, D.C. 20549

FORM D

AUG 14 2008

Washington, DC

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NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

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OMB APPRO	VAL
OMB Number: 323 Expires: August 31, Estimated average burd hours per response:	

SEC USE ONLY

DATE RECEIVED

Serial

Prefix

Name of Offering (☐ check if this is an amendment and name has changed, and indicate change.) Goldman Sachs Hedge Fund Opportunities (2007), LLC: Units of Limited Liability Comp	pany Interests
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☑ Rule 506 ☐	Section 4(6) ULOE
Type of Filing: ☐ New Filing ☑ Amendment	
A. BASIC IDENTIFICATION DATA	+ 540 (II) DOTAS (ALII) DOTAS DITOL TASAS (ARIO 1671) DASAS (ARI
Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	O8058194
Goldman Sachs Hedge Fund Opportunities (2007), LLC	
Address of Executive Offices (Number and Street, City, State, Zip Code) c/o Goldman Sachs Hedge Fund Strategies LLC, One New York Plaza, New York, NY 10004	Telephone Number (including Area Code) (212) 902-1000
Address of Principal Business Operations (if different from Executive Offices) (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
Brief Description of Business	- 700FD
To operate as a private investment fund.	OCESSED JG 2 6 2008 SON REUTERS ease specify): Limited Liability Company
Type of Business Organization	SON PEUTEDO
☐ corporation ☐ limited partnership, already formed	☑ Viller (pease specify):
☐ business trust ☐ limited partnership, to be formed	Limited Liability Company
Actual or Estimated Date of Incorporation or Organization: Month Year 1 2 0 6	☑ Actual ☐ Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviat State: CN for Canada; FN for other foreign jurisdiction of Incorporation or Organization:	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collections of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

2. Enter the information requested for the following:								
* Each promoter of the issuer, if the issuer has been organized within the past five years;								
* Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;								
* Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and								
* Each general and managing partner of partnership issuers.								
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☑ General and/or Managing Partner								
Full Name (Last name first, if individual)								
Goldman Sachs Hedge Fund Strategies LLC (the Issuer's Managing Member)								
Business or Residence Address (Number and Street, City, State, Zip Code)								
One New York Plaza, New York, NY 10004								
Check Box(es) that Apply: ☐ Promoter ☑ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner								
Full Name (Last name first, if individual)								
Goldman Sachs Diversified Strategies Fund, L.P.								
Business or Residence Address (Number and Street, City, State, Zip Code)								
c/o Goldman Sachs Hedge Fund Strategies LLC, One New York Plaza, New York, New York 10004								
Check Box(es) that Apply:								
Full Name (Last name first, if individual)								
Asali, Omar								
Business or Residence Address (Number and Street, City, State, Zip Code)								
c/o Goldman Sachs Hedge Fund Strategies LLC, One New York Plaza, New York, New York 10004								
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director* General and/or *of the Issuer's Managing Member Managing Partner								
Full Name (Last name first, if individual)								
Barbetta, Jennifer								
Business or Residence Address (Number and Street, City, State, Zip Code)								
c/o Goldman Sachs Hedge Fund Strategies LLC, One New York Plaza, New York, New York 10004								
Check Box(es) that Apply: Promoter Beneficial Owner *of the Issuer's Managing Member General and/or Managing Partner								
Full Name (Last name first, if individual)								
Ort, Peter								
Business or Residence Address (Number and Street, City, State, Zip Code)								
c/o Goldman Sachs Hedge Fund Strategies LLC, One New York Plaza, New York, New York 10004								
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner								
Full Name (Last name first, if individual)								
Business or Residence Address (Number and Street, City, State, Zip Code)								
Check Box(es) that Apply:								
Full Name (Last name first, if individual)								
Business or Residence Address (Number and Street, City, State, Zip Code)								
(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)								

A. BASIC IDENTIFICATION DATA

- · · · · · · · · · · · · · · · ·				B. INI	FORMAT	ION ABO	UT OFFI	ERING				
-											Yes	No
1. Has the	e issuer solo	i, or does th	e issuer inte	end to sell,	to non-accre	edited inves	tors in this	offering?				☑
			A	nswer also	in Appendi	ix, Column	2, if filing u	ınder ULOE	E.			
2. What i	s the minim	um investm	ent that wil	l be accepte	ed from any	individual?					\$	0,000*
*The Managing Member of the Issuer, in its sole discretion, may accept subscriptions in lesser amounts. 3. Does the offering permit joint ownership of a single unit?							Yes ☑	No □				
	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any											
commi	ssion or sin	nilar remune	eration for s	olicitation	of purchase	rs in connec	ction with sa	ales of secu	rities in the o	offering.		
If a per	rson to be li	sted is an as	ssociated pe	rson or age	nt of a brok	er or dealer	registered v	with the SE	C and/or wit	h a state		
or state	es, list the n er or dealer	ame of the you may se	broker or de t forth the i	ealer. It mo nformation	ore than five for that bro	e (5) person ker or deale	s to be listed er only.	d are associ	ated persons	or sucn		
		first, if ind						***				
1 an i vanie	(Last name	, mst, m ma	1114441)									
	Sachs & C		, , , , , , , , , , , , , , , , , , , 	G:	0 7:	0.1)						,,
Business o	r Residence	e Address (N	Number and	Street, City	y, State, Zip	(Code)						
85 Broad	Street, Nev	v York, Nev	w York 100	04								
Name of A	ssociated B	Broker or De	aler	•								
		n Listed Ha										
(Check "	All States" of	or check ind	ividual Stat	e s)				*				1 States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[lA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name	: (Last name	first, if ind	ividual)									
	<u> </u>				·							
Business o	or Residence	e Address (N	Number and	Street, City	y, State, Zip	Code)						
Name of A	Associated B	Broker or De	aler									
States in V	Vhich Perso	n Listed Ha	s Solicited	or Intends t	o Solicit Pu	rchasers						
									,		🗆 Al	l States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name	(Last name	e first, if ind	ividual)									
Business of	or Residence	e Address (1	Number and	Street, Cit	y, State, Zip	Code)						
Name of A	Associated E	Broker or De	aler									
States in V	Which Perso	n Listed Ha	s Solicited	or Intends t	o Solicit Pu	rchasers						
	States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)											
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV] _	[WI]	[WY]	[PR]

TN] [TX] [UT] [VT] [VA] [WA] [WV] (Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \Box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security		Aggregate Offering Price		Amount Already Sold
	Debt	\$_	0	\$	0
	Equity (Shares)	\$	0	\$	0
	☐ Common ☐ Preferred	_			
	Convertible Securities (including warrants)	\$_	0	\$	0
	Partnership Interests	\$_	0	\$	0
	Other (Specify: Units of Limited Liability Company Interests)	\$_	744,069,644	\$	744,069,644
	Total	\$	744,069,644	\$	744,069,644
	Answer also in Appendix, Column 3, if filing under ULOE.				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Number		Aggregate Dollar Amount
	A N. AV		Investors	•	of Purchases
	Accredited Investors	_	438	\$	
	Non-accredited Investors	_	0	\$	
	Total (for filings under Rule 504 only)	_	N/A	3	N/A
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		Type of		Dollar Amount
	Type of offering		Security		Sold
	Rule 505	_	N/A	\$	N/A
	Regulation A	_	N/A	\$	N/A
	Rule 504	_	N/A	\$	N/A
	Total	_	N/A	\$	N/A
tl tl	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of the expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees			\$	0
	Printing and Engraving Costs			\$	0
	Legal Fees		\square	\$	256,248
	Accounting Fees			\$	0
	Engineering Fees			\$	0
	Sales Commissions (specify finders' fees separately)			\$	0
	Other Expenses (identify)			\$	0
	Total		ゼ	\$	256,248

C. OFFERING PRICE,	NUMBER OF INVESTORS, EXP	PENS	ES A	ND USE OF P	ROCE	EDS	
 b. Enter the difference between the aggre Question 1 and total expenses furnishe difference is the "adjusted gross proceeds" 	d in response to Part C - Question 4.a	. Th	is		\$_	. <u>.</u>	743,813,396
5. Indicate below the amount of the adjusted to be used for each of the purposes shown furnish an estimate and check the box payments listed must equal the adjusted gr to Part C - Question 4.b. above.	a. If the amount for any purpose is not to the left of the estimate. The total	knowi of th	n, ie				
•				Payments to Officers, Directors, & Affiliates			Payments To Others
Salaries and Fees			\$_	0	_ 📮	\$_	0
Purchase of real estate			\$_	0		\$_	0
Purchase, rental or leasing and installation	of machinery and equipment		\$_	0		\$_	0
Construction or leasing of plant buildings	and facilities		\$_	0		\$_	0
Acquisition of other businesses (including this offering that may be used in excha another issuer pursuant to a merger)	nge for the assets or securities of		\$	0		\$	0
Repayment of indebtedness			\$	0		\$	0
Working capital			\$	0	-	\$	0
Other (specify): Investment Capital			\$	0	- 121	\$	743,813,396
Column Totals			\$_	0	21	\$_	743,813,396
Total Payments Listed (column totals adde			☑ \$	743,813,396			
	D. FEDERAL SIGNATUI	RE					
The issuer has duly caused this notice to be following signature constitutes an undertakin of its staff, the information furnished by the is	g by the issuer to furnish to the U.S. Se	curiti	es an	d Exchange Comn	nission,	ироп	r Rule 505, the written request
Issuer (Print or Type)	Signature			Date		• •	
Goldman Sachs Hedge Fund Opportunities (2007), LLC	Faith some		_	August <u>i </u>	8		
Name of Signer (Print or Type)	Title of Signer (Frint or Type)			<u>. </u>			
Kathryn Pruess	Vice President of the Issuer's Mana	ging [Meml	per			

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).

